

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	MM	7051	11/5
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW		C-955	12/8
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected N ..... Non-elected  
 = ..... Allowed I ..... Interference  
 - (Through numeral)... Canceled A ..... Appeal  
 ÷ ..... Restricted O ..... Objected

Claim	Final Original	Date	Claim	Final Original	Date	Claim	Final Original	Date
1	1	1/13	51			101		
2	2		52			102		
3	3		53			103		
4	4		54			104		
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10	10		60			110		
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22	22		72			122		
23	23		73			123		
24	24		74			124		
25	25		75			125		
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27	27		77			127		
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29	29		79			129		
30	30		80			130		
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35	35		85			135		
36	36		86			136		
37	37		87			137		
38	38		88			138		
39	39		89			139		
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41	41		91			141		
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43	43		93			143		
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48	48		98			148		
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50	50		100			150		

If more than 150 claims or 10 actions  
staple additional sheet here

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